

MyVoice: Youth Perspectives on School-Based Health Education



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BACKGROUND



- School-based health education has the goal of developing health literacy and establishing positive behaviors in the youth population.
- Poorly constructed curricula and implementation often prevents this goal from being achieved.
- MyVoice is a weekly national text message poll that surveys youth aged 14 to 24 on different health and policy related topics¹
- The purpose of this study is to explore U.S youth's experiences with health education in schools to identify areas of improvement

METHODS



Participants:

- Young adults and adolescents (aged 14-24) recruited from around the U.S through social media

Data Collection:

- Weekly national text message poll called MyVoice
- 5 open-ended questions, developed by high school students, regarding one's experience with school-based health education were asked:

1. This week's questions are about health education in school (Kindergarten through 12th grade). How do/did you feel about your health education in school? Tell us about it.
2. What topics were covered in your health education in school?
3. Health education can include topics related to physical health, mental health, and sexual health. What do you wish you had learned in health education in school?
4. Outside of school, where did you learn about health?
5. How do you think schools could make health education better?

Data Analysis:

- A qualitative thematic analysis of the text message responses was conducted to develop themes regarding youth perceptions of health education in U.S schools.

RESULTS

Theme 1: Young adults and adolescents want more comprehensive health education

"[Schools] could go more in depth because just skimming the surface of all topics isn't enough, especially when it has to do with someone's health. They need to be informed"

18, White, male



"[Schools] could place an equal emphasis on all aspects of health education so that people learn everything thoroughly"

21, Asian, female



Theme 2: Youth want their sexual health education to be more socially inclusive, and sex positive, with a focus on sexual risk reduction

"I wish we had learned more about sexual health, it wasn't very inclusive and only pertained to heterosexual activities and relationships"

20, White, non-binary



"Less stigmatization around sex and talks of safe sex [could make health education better]"

17, Mixed Race, female



Theme 3: Youth want mental health education to be covered more extensively

"I think schools could make health education better by teaching more about mental health and focusing on removing the stigma surrounding it"

19, Middle Eastern, female



"I wish my health education had included more on mental health. That was one of the topics it ignored in favor of physical and sexual health, which are not independent of mental health."

20, Mixed Race, female



Theme 4: Young adults and adolescents want more socially aware, and practical education on diet/exercise

"I think [health education] can be more comprehensive and emphasis body acceptance more than [just] what's "healthy" and what's "bad for you"

23, White, female



"I feel kind of iffy about the health education I received in grade school. I would've loved to have more of a focus on nutrition and cooking healthy meals because I seriously struggle with that now."

23, Black/African American, female



Theme 5: Young adults and adolescents consider interpersonal relationships as the best/most reliable resource for health information

"I felt pretty good [about my health education]. I felt like I was being prepared for my future endeavors. I had really great and supportive teachers throughout those years"

21, White, male



"Don't be afraid to talk to kids about awkward subjects! We already know about them and it's helpful to have trusted adults teach reputable information"

23, White, trans man



Table 1: Participant Demographics

	n(%)
N=506	n(%)
Age, mean (SD)	19.99 (2.29)
Gender n(%)	
Female	242 (48)
Male	195 (39)
Non-binary	37 (7.3)
Trans Woman	3 (0.6)
Trans Man	17 (3.4)
Other	12 (2.4)
Race n(%)	
American Indian or Alaska Native	1 (0.2)
Asian	76 (15)
Black/African American	52 (10)
Mixed race	45 (8.9)
Native Hawaiian or Other Pacific Islander	1 (0.2)
White/Caucasian	313 (62)
Other	17 (3.4)
Hispanic n(%)	60 (12)
Education n(%)	
Less than high school	52 (10)
Some high school	29(5.7)
High school graduate	117 (23)
Completed vocational/technical training	1 (0.2)
Completed an associate's degree	25(4.9)
Some college	186 (37)
Completed a bachelor's degree	84 (17)
Some graduate school	4 (0.8)
Completed a master's degree	8 (1.6)
Geographic Regions n(%)	
West	116 (23)
Midwest	161 (32)
South	139 (28)
Northeast	89 (18)
SES n(%)	
Low (ever received free lunch)	188 (37)

Of the 791 participants of the study 506 responded to the MyVoice questionnaire (64% response rate)

CONCLUSION



- U.S. schools should update their health education curricula using input from their target audience, adolescents and young adults.
- Reformed health education programs would teach health holistically, utilize interactive techniques in and outside the classroom, and promote open conversation about health between learners, and their teachers.

REFERENCES

[1] DeJonckheere, M., Nichols, P., L., Moniz, H., M., Sonnevill, R., K., Vydiswaran, V., V., Zhao, X., Guetterman, C., T., & Chang, T. (2017). MyVoice National Text Message Survey of Youth Aged 14 to 24 Years: Study Protocol. JMIR Res Protoc, 6(12). <https://doi.org/10.2196/resprot.8502>